

# KSOP SCHOLARSHIP APPLICATION FORM

Application Deadline: April 30, 2023; 3:00 pm (CET)

## 1. Personal Information

Last Name:	First Name:
Date of birth (DD/MM/YY):	Place of birth:
Nationality:	Gender: <input type="checkbox"/> male <input type="checkbox"/> female <input type="checkbox"/> other
Correspondence address:	
Phone:	E-mail:

## 2. Optics & Photonics related experience (working experience or else)

1) Institute / Organization / Company:		
Type of work:		
Duration (month/year)	From	To
2) Institute / Organization / Company:		
Type of work:		
Duration (month/year)	From	To

## 3. Language Proficiencies

Mother tongue:
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**German proficiency** (Deutsch als Fremdsprache level) - **(Please attach documents of proof to this form):**

<input type="checkbox"/> A1	<input type="checkbox"/> A2	<input type="checkbox"/> B1	<input type="checkbox"/> B2	<input type="checkbox"/> C1	<input type="checkbox"/> C2
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**4. Please make sure to submit the following documents. If we do not receive them, we will not be able to consider your scholarship application.**

Bachelor Transcript of records

Current CV

Letter of Motivation (1 page maximum)

**5. Final Declaration**

I hereby declare that all statements contained in this application are true.

I agree to report any relevant alteration in the information given above.

**6. Please submit this scholarship application form along with attachments in a single PDF document (maximum size 5 MB) to [StudentOffice-KSOP@idschools.kit.edu](mailto:StudentOffice-KSOP@idschools.kit.edu) until April 30, 2024; 3:00 pm CET. Scholarship applications submitted after this deadline will not be considered.**